

# MEDI-CAL HEALTH CARE PROGRAM UPDATE

June 16, 2003



## Aged and Disabled Federal Poverty Level (A&D FPL) Program



Since January 1, 2001, the Aged & Disabled Federal Poverty Level (A&D FPL) Program has provided zero share of cost Medi-Cal to aged and disabled persons. Since this is an FPL-based program, the income levels increase each year.

The Welfare & Institutions Code (W&I) requires that the income standard for this program be no less than the SSI/SSP payment standard. Therefore, the income standard for couples has fluctuated since January 2003 in order to comply with this requirement. Below are the 2003 income levels and disregard amounts to be used for this program:

Effective Dates	100% FLP	Income Disregard	Total Countable Income
<b>INDIVIDUALS</b>			
04/01/03	\$749	\$230	\$979
<b>SPOUSE COUPLES</b>			
01/01/03 - 03/31/03	\$995	\$349	\$1,344
04/01/03 - 05/31/03	\$1,010	\$334	\$1,344
06/01/03 - 12/31/03	\$1,010	\$373	\$1,383

Effective immediately, staff are to use these new income limits when determining eligibility to the A&D FPL program. This program is not in LEADER. Therefore, EWs should follow established workaround instructions provided in Administrative Directive 4095. Further instructions on this information will soon be released.

(Ref. ACWDL 03-21, dated 4/23/03)

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## Redetermination

Staff is reminded to continue conducting timely annual redeterminations. Medi-Cal regulations state that persons or families determined to be eligible for Medi-Cal shall have their eligibility redetermined at least once every 12 months.



NOTE: The recent LEADER program change in Build #144 should help staff in managing this workload.

(Ref. Administrative Memorandum 03-07, dated 5/21/03)

## Newborns

Infants born to Medi-Cal eligible mothers are automatically eligible for one year of Medi-Cal coverage. To ensure that these newborns have continuous medical coverage, Medi-Cal regulations allow full-scope medical services for the newborn child to be billed on the mother's Medi-Cal Benefit Issuance Card (BIC) for the month of birth and the following month regardless of the mother's scope of coverage.



Remember: Medi-Cal eligibility for newborn infants continues (*Continuous Eligibility (CE) program formerly known as the Increased Income Disregard (IID) program*) without regard to the changes in family income or resources until the infant's first birthday.

(Ref. Administrative Directive 4201, dated 2/4/03)

## COMING ATTRACTIONS Beginning July 2003:

**Express Enrollment Pilot** LAUSD will be transferring information to the Mail-In Application Center, # 89, on children who have been determined eligible to the free school lunch program and are also interested in receiving Medi-Cal benefits. These children will be temporarily enrolled into Medi-Cal until their on-going eligibility can be established.

**CHDP Gateway** Medical providers will begin express enrolling children who are found eligible to CHDP. The process will be similar to the existing Accelerated Enrollment.



## LEADER WORK AROUND NUMBER 46-FAILURE TO COMPLY WITH INTEGRATED FRAUD DETECTION SYSTEM (IFDS)

Currently, LEADER is not programmed to terminate a case when a participant or Medi-Cal beneficiary fails to appear for an IFDS appointment and/or respond to a request for information (e.g., PA 2418). Therefore a manual termination must be initiated on these cases.

Medi-Cal policy provides that the parent(s)/caretaker relative(s) and children with a share of cost be terminated for failure to appear/respond to the IFDS process. However, children with no share of cost, under the protection of the Continuous Eligibility for Children (CEC) program and infants up to one year of age, protected by the Continued Eligibility (CE) or Deemed Eligibility (DE) program are exempt from these requirements and cannot be terminated.

Below are the steps to be taken when parents fail to respond to PA 2418:

1. In the **Data Collection** subsystem, select the **Case Individual Summary** screen, enter the Case #, and select Open Window.
  - a. Select the parent(s)/caretaker relative(s) that failed to respond to the PA 2418 and select the Detail button.
  - b. In the Applying for Aid field, enter an "N" for the parent(s)/caretaker relative(s) that failed to respond, and select Save.
2. Run SFU/EDBC on-line.
  - a. Review CalWORKs and Food Stamps to ensure the segments are terminated. Review Medi-Cal to ensure that only the children remain eligible.
  - b. Authorize.
3. The Eligibility Supervisor reviews and authorizes per existing procedure. The ES will suppress the CalWORKs and Food Stamps NOA.
  - a. Go to the **Client Correspondence** subsystem. Select the **View Pending Client Correspondence** screen. Enter the case number, and Open Window.
  - b. Select the appropriate Client Request termination NOAs, and select the Suppress/Release button.
4. Send out the appropriate manual termination NOA.
5. In the Data Collection subsystem, select the Case Comments screen and enter the case comments.

**NOTE:** CalWORKs and Food Stamps policy require the case be terminated. The CalWORKs and Food Stamps are terminated prior to the Medi-Cal.

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